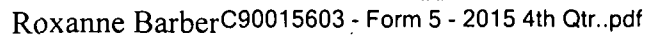




Subject: Form 5, 4th Qtr. 2015, ID# C90015603

Thank you,



FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <i>Paul Gibson</i>	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <i>4 Punta del Cazador</i>	
(c) City, State and ZIP Code <i>Santa Fe, NM 87506</i>	
2. Occupation and Name of Employer (for Individual Filers Only) <i>Self-employed</i>	3. FEC Identification Number <i>090015603</i>

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ 24-Hour Report

☐ October 15 Quarterly Report

☐ 48-Hour Report

☒ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

5. COVERING PERIOD:

FROM

10 / *01* / *2015*

THROUGH

12 / *31* / *2015*

6. TOTAL CONTRIBUTIONS.....

69,140.00

7. TOTAL INDEPENDENT EXPENDITURES

45,958.33

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Paul Gibson

SIGNATURE

Paul Gibson

DATE

1/15/16

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE OF

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)

Paul Gibson

A. Full Name (Last, First, Middle Initial)

Un-itemized T-shirt and bumper sticker donations

Mailing Address

(Call #20 or less)

City

State

Zip Code

Date of Receipt

12 / 01 / 2015

Amount of Each Receipt this Period

707.00

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

B. Full Name (Last, First, Middle Initial)

Un-itemized cash donations

Mailing Address

(Call #100 or less)

City

State

Zip Code

Date of Receipt

12 / 01 / 2015

Amount of Each Receipt this Period

6207.00

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

D. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page carry total to Line 6)

6914.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Paul Gibson

Full Name (Last, First, Middle Initial) of Payee

The Printers

Mailing Address

418 Cerrillos Rd

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10/01/2015

Amount

568.64

Purpose of Expenditure

T-shirts - printing

Category/
Type

006

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

4697.35

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Office Depot

Mailing Address

153 Paseo de Peralta

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10/02/2015

Amount

291.11

Purpose of Expenditure

Office supplies

Category/
Type

001

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

4726.46

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Eye 480 LLC, c/o Richard Ellenberg

Mailing Address

1714 Canyon Rd.

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10/06/2015

Amount

300.00

Purpose of Expenditure

Hall rental for gen. meeting

Category/
Type

007

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

5026.46

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

8977.55
568.64

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

2015-01-15 PM 00:00:00

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 2 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Paul Gibson

Full Name (Last, First, Middle Initial) of Payee

The Printer

Mailing Address

418 Cerrillos Rd.

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10 02 2015

Amount

1,130.8

Purpose of Expenditure

Flyers

Category/
Type

003

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

5,139.54

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

The Printer

Mailing Address

418 Cerrillos Rd.

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10 07 2015

Amount

81.23

Purpose of Expenditure

Flyers

Category/
Type

003

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

5,220.77

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

The Printer

Mailing Address

418 Cerrillos Rd.

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10 09 2015

Amount

1,560

Purpose of Expenditure

Flyers

Category/
Type

003

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

5,236.37

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

1,130.8

(b) SUBTOTAL of Unitemized Independent Expenditures

81.23

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

1,212.03

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 3 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Paul Gibson

Full Name (Last, First, Middle Initial) of Payee

The Reporter

Mailing Address

132 E. Marcy St.

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10 05 2015

Amount

46726

Purpose of Expenditure

Ad for Bernie event

Category/
Type

004

Office Sought:

☐ House
☐ Senate

State: *NM*
District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

564363

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Fed Ex Office

Mailing Address

301 North Guadalupe

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10 17 2015

Amount

2677

Purpose of Expenditure

Photocopies

Category/
Type

006

Office Sought:

☐ House
☐ Senate

State: *NM*
District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

567040

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

The Printers

Mailing Address

418 Cerrillos Rd.

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

10 15 2015

Amount

13214

Purpose of Expenditure

Flyers

Category/
Type

003

Office Sought:

☐ House
☐ Senate

State: *NM*
District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election
for Office Sought

580254

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

167387
580254

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) Paul Gibson			
Full Name (Last, First, Middle Initial) of Payee Mail Chimp		Date of Public Distribution/Dissemination 70' 78' 2015	
Mailing Address 675 Ponce de Leon NE, Ste. 5000		Amount 2500	
City Atlanta	State GA	Zip Code 30308	
Purpose of Expenditure Monthly fee for email newsletter platform		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NM District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernie Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 582754		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Sign Up Genius		Date of Public Distribution/Dissemination 70' 22' 2015	
Mailing Address 7825 Ballantyne Commons Parkway		Amount 999	
City Charlotte	State NC	Zip Code 28277	
Purpose of Expenditure Monthly fee for online volunteer sign up platform		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NM District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernie Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 583753		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Democratic Party of New Mexico		Date of Public Distribution/Dissemination 71' 03' 2015	
Mailing Address 8214 Second St. NW		Amount 75500	
City Albuquerque	State NM	Zip Code 87114	
Purpose of Expenditure Access to Voter Activation Network		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NM District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernie Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 659253		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		246382	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) <u>Paul Gibson</u>			
Full Name (Last, First, Middle Initial) of Payee <u>The Printer</u>		Date of Public Distribution/Dissemination <u>11</u> / <u>06</u> / <u>2015</u>	
Mailing Address <u>418 Cerrillos Rd.</u>		Amount <u>170.05</u>	
City <u>Santa Fe</u>	State <u>NM</u>	Zip Code <u>87501</u>	
Purpose of Expenditure <u>Bumper stickers</u>		Category/Type <u>006</u>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Bernie Sanders</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <u>676258</u>			
Full Name (Last, First, Middle Initial) of Payee <u>The Printer</u>		Date of Public Distribution/Dissemination <u>11</u> / <u>13</u> / <u>2015</u>	
Mailing Address <u>418 Cerrillos Rd.</u>		Amount <u>19496</u>	
City <u>Santa Fe</u>	State <u>NM</u>	Zip Code <u>87501</u>	
Purpose of Expenditure <u>Flyers</u>		Category/Type <u>006</u>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Bernie Sanders</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <u>695754</u>			
Full Name (Last, First, Middle Initial) of Payee <u>Build-A-Sign</u>		Date of Public Distribution/Dissemination <u>11</u> / <u>16</u> / <u>2015</u>	
Mailing Address <u>11525A Stonehollow Dr. Suite 100</u>		Amount <u>6615</u>	
City <u>Austin</u>	State <u>TX</u>	Zip Code <u>78758</u>	
Purpose of Expenditure <u>Campaign office sign</u>		Category/Type <u>001</u>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Bernie Sanders</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <u>702369</u>			
(a) SUBTOTAL of Itemized Independent Expenditures.....		<u>2894.88</u> <u>702369</u>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 6 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) <i>Paul Gibson</i>			
Full Name (Last, First, Middle Initial) of Payee <i>Ace Hardware</i>		Date of Public Distribution/Dissemination <i>10/18/2015</i>	
Mailing Address <i>2006 Cerrillos Rd. Suite 1</i>		Amount <i>3894</i>	
City <i>Santa Fe</i>	State <i>NM</i>	Zip Code <i>87505</i>	
Purpose of Expenditure <i>Supplies for Bernie rally</i>		Category/Type <i>007</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <i>NM</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Bernie Sanders</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <i>206263</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <i>Image Ratio Printing</i>		Date of Public Distribution/Dissemination <i>10/18/2015</i>	
Mailing Address <i>1810 Second St.</i>		Amount <i>10506</i>	
City <i>Santa Fe</i>	State <i>NM</i>	Zip Code <i>87505</i>	
Purpose of Expenditure <i>Flyers</i>		Category/Type <i>003</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <i>NM</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Bernie Sanders</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <i>716769</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <i>The Reporter</i>		Date of Public Distribution/Dissemination <i>10/14/2015</i>	
Mailing Address <i>132 E. Marcy St</i>		Amount <i>67370</i>	
City <i>Santa Fe</i>	State <i>NM</i>	Zip Code <i>87501</i>	
Purpose of Expenditure <i>Ad for Bernie benefit</i>		Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <i>NM</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Bernie Sanders</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <i>784139</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		<i>371268</i> <i>784139</i>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 7 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) <i>Paul Gibson</i>			
Full Name (Last, First, Middle Initial) of Payee <i>Office Depot</i>		Date of Public Distribution/Dissemination <i>11/14/2015</i>	
Mailing Address <i>153 Paseo de Peralta</i>		Amount <i>5157</i>	
City <i>Santa Fe</i>	State <i>NM</i>	Zip Code <i>87501</i>	
Purpose of Expenditure <i>campaign office materials</i>		Category/Type <i>006</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Bernie Sanders</i>		State: <i>NM</i> District: _____	
Calendar Year-To-Date Per Election for Office Sought <i>289296</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <i>Mike Tate - The Button Fairy</i>		Date of Public Distribution/Dissemination <i>11/13/2015</i>	
Mailing Address <i>234 Hull St. #2</i>		Amount <i>4300</i>	
City <i>Arlington</i>	State <i>MA</i>	Zip Code <i>02043</i>	
Purpose of Expenditure <i>Buttons</i>		Category/Type <i>006</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Bernie Sanders</i>		State: <i>NM</i> District: _____	
Calendar Year-To-Date Per Election for Office Sought <i>293596</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <i>Sign Up Genius</i>		Date of Public Distribution/Dissemination <i>11/22/2015</i>	
Mailing Address <i>7825 Ballantyne Commons Pkwy</i>		Amount <i>999</i>	
City <i>Charlotte</i>	State <i>NC</i>	Zip Code <i>28277</i>	
Purpose of Expenditure <i>monthly fee for online volunteer sign up platform</i>		Category/Type <i>001</i>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Bernie Sanders</i>		State: <i>NM</i> District: _____	
Calendar Year-To-Date Per Election for Office Sought <i>794595</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		<i>381724</i> <i>794595</i>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 8 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
Paul Gibson

Full Name (Last, First, Middle Initial) of Payee <u>Mail Chimp</u>		Date of Public Distribution/Dissemination <u>11</u> <u>22</u> <u>2015</u>	
Mailing Address <u>675 Ponce de Leon NE, Ste. 5000</u>		Amount <u>2500</u>	
City <u>Atlanta</u>	State <u>GA</u>	Zip Code <u>30308</u>	
Purpose of Expenditure <u>monthly fee for email newsletter platform</u>		Category/Type <u>001</u>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <u>NM</u>
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Bernie Sanders</u>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <u>797095</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <u>The Commons On The Alameda</u>		Date of Public Distribution/Dissemination <u>11</u> <u>23</u> <u>2015</u>	
Mailing Address <u>2300 W. Alameda</u>		Amount <u>2500</u>	
City <u>Santa Fe</u>	State <u>NM</u>	Zip Code <u>87507</u>	
Purpose of Expenditure <u>Rent for meeting space</u>		Category/Type <u>007</u>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <u>NM</u>
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Bernie Sanders</u>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <u>799595</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <u>Office Depot</u>		Date of Public Distribution/Dissemination <u>12</u> <u>04</u> <u>2015</u>	
Mailing Address <u>153 Paseo de Peralta</u>		Amount <u>865</u>	
City <u>Santa Fe</u>	State <u>NM</u>	Zip Code <u>87501</u>	
Purpose of Expenditure <u>Rubber bands for canvass door-hangers</u>		Category/Type <u>007</u>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <u>NM</u>
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Bernie Sanders</u>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <u>800960</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<u>3875.89</u> <u>800960</u>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 9 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Paul Gibson

Full Name (Last, First, Middle Initial) of Payee

The Printer

Mailing Address

418 Cerrillos Rd.

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

12/08/2015

Amount

292.44

Purpose of Expenditure

Banner, doorhangers, flyers

Category/Type

006

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election for Office Sought

829.704

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

El Museo Cultural de Santa Fe

Mailing Address

555 Camino de la Familia

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

12/08/2015

Amount

500.00

Purpose of Expenditure

Meeting space rental

Category/Type

007

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election for Office Sought

839.704

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Office Depot

Mailing Address

153 Paseo de Peralta

City

Santa Fe

State

NM

Zip Code

87501

Date of Public Distribution/Dissemination

12/10/2015

Amount

703.9

Purpose of Expenditure

Office supplies - printer cartridge

Category/Type

001

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election for Office Sought

841.243

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

4288.72
841.243

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

NOTICE: THIS DOCUMENT CONTAINS SENSITIVE INFORMATION

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 20 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) Paul Gibson			
Full Name (Last, First, Middle Initial) of Payee Pizza Centro		Date of Public Distribution/Dissemination 12/19/2015	
Mailing Address 7 Avenida Vista Grande		Amount 226.84	
City Santa Fe	State NM	Zip Code 87508	
Purpose of Expenditure Food for Debate Watch Party		Category/Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bernie Sanders		State: NM District: _____	
Calendar Year-To-Date Per Election for Office Sought 8644.27		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Staples		Date of Public Distribution/Dissemination 12/14/2015	
Mailing Address 3529 Zatarano Dr.		Amount 45.28	
City Santa Fe	State NM	Zip Code 87507	
Purpose of Expenditure Office supplies		Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bernie Sanders		State: NM District: _____	
Calendar Year-To-Date Per Election for Office Sought 8689.55		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Mail Chimp		Date of Public Distribution/Dissemination 12/18/2015	
Mailing Address 675 Ponce de Leon NE, Ste. 5000		Amount 25.00	
City Atlanta	State GA	Zip Code 30308	
Purpose of Expenditure Monthly fee for email/newsletter platform		Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bernie Sanders		State: NM District: _____	
Calendar Year-To-Date Per Election for Office Sought 8714.55		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		4585.84	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 11 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Paul Gibson

Full Name (Last, First, Middle Initial) of Payee

Sign Up Genius

Mailing Address

7825 Ballantyne Commons Parkway

City

Charlotte

State

NC

Zip Code

28277

Date of Public Distribution/Dissemination

12/22/2015

Amount

999

Purpose of Expenditure

Monthly fee for online volunteer platform

Category/Type

001

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election for Office Sought

872454

Disbursement For: ☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Mailing Address

City

State

Zip Code

Date of Public Distribution/Dissemination

_____/_____/____

Amount

Purpose of Expenditure

Category/Type

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: ☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Mailing Address

City

State

Zip Code

Date of Public Distribution/Dissemination

_____/_____/____

Amount

Purpose of Expenditure

Category/Type

Office Sought:

☐ House

State: *NM*

☐ Senate

District: _____

☒ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bernie Sanders

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: ☒ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

459583

(b) SUBTOTAL of Unitemized Independent Expenditures.....


(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

459583
872454

2016-01-15 00:00:00

2016-15-000700000

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): Σ -Mail	Date of Receipt or Postmarked 1/15/16
 PREPARER (3/2015)	1/15/16 DATE PREPARED

2016-01-14 10:00:00